

Whitesage Workshop Application Form

Student Information:

Last Name _____

First Name _____ Middle Initial _____

Street _____

City _____ State _____ Zip _____

Phone _____ Cell _____

E-mail _____

Birth Date _____

Parent Information

Name _____ Name _____

Signature _____ Signature _____

Title _____ Title _____

Date _____ Date _____

Cell phone _____ Cell phone _____

What school do you attend? _____ Name of your art/theater instructor? _____

Class of _____ Field of Interest _____

What area do you struggle with?

What skills are you bringing to the program?

What do you feel are your best assets?

Where do you see yourself in twenty years?

What would you like to walk away with from this workshop?

Check List

Application Work sample (ie painting,sculpture, resume, play, a photo of your personal fashion statement)

Financial aid information (if applicable) Housing requirements (if applicable)